

## COMMONWEALTH OF PENNSYLVANIA POLICE ACCIDENT REPORT

XX) REFER TO OVERLAY SHEETS	REPORTABLE	NON - REPORTABLE	PENNDOT USE ONLY		
POLICE II	NEORMATION	ACCIDENT LOC	CATION		
1. INCIDENT		20. COUNTY	CODE		
NUMBER		Tot MUNICIPAL ITS	CODE		
2. AGENCY NAME		21. MUNICIPALITY	CODE		
3. STATION/	4. PATROL	PRINCIPAL ROADWAY INFORMATION			
PRECINCT	ZONE		IIVI ORIVIATION		
5. INVESTIGATOR	BADGE NUMBER	22. ROUTE NO. OR STREET NAME			
6. APPROVED BY	BADGE	23. SPEED (24.)TYPE	25 ACCESS		
	NUMBER	LIMIT HIGHWAY	CONTROL		
7. INVESTIGATION DATE	8. ARRIVAL TIME	INTERSECTIN	G ROAD:		
ACCIDENT INFORMATION		26. ROUTE NO. OR STREET NAME			
9. ACCIDENT	10. DAY OF WEEK	27. SPEED (28.)TYPE	(29.) ACCESS		
DATE		LIMIT HIGHWAY	CONTROL		
11. TIME OF DAY	12. NUMBER OF UNITS	IF NOT AT INTERS	SECTION:		
13. # KILLED 14.# INJURED	15. PRIV. PROP.	30. CROSS STREET OR			
	ACCIDENT Y N	SEGMENT MARKER			
16. DID VEHICLE HAVE TO BE	17. VEHICLE DAMAGE	31. DIRECTION 32. DISTAI FROM SITE N S E W FROM			
REMOVED FROM THE SCENE?	0 - NONE UNIT 1	FROM SITE N S E W   FROM	SITE FT. MI		
UNIT 1 UNIT 2	1 - LIGHT	33. DISTANCE WAS MEASURED	ESTIMATED :		
Y	2 - MODERATE 3 - SEVERE UNIT 2	(34) CONSTRUCTION , (35) TRAFFIC	PRINCIPAL INTERSECTING		
		ZONE CONTROL			
18. HAZARDOUS MATERIALS Y N	19. PENNDÔT PROPERTY Y N	DEVICE			
		UNIT # 2			
er e	IIT#1	5 A A A A A A A A A A A A A A A A A A A			
36. LEGALLY Y N 37. REG. PARKED ? L : _ PLATE	38. STATE	36. LEGALLY Y N 37. REG. PARKED ?	38. STATE		
39. PATITLE OR		39. PATITLE OR	-		
OUT-OF-STATE VIN		OUT-OF-STATE VIN			
40. OWNER		40. OWNER			
41. OWNER		41. OWNER			
ADDRESS		ADDRESS			
42. CITY, STATE		42. CITY, STATE			
& ZIPCODE		& ZIPCODE			
43. YEAR 44. MAKE		43. YEAR 44. MAKE			
45. MODEL - (NOT	46. INS	45. MODEL - (NOT	46. INS		
BODY TYPE)	Y LJ N'L UNK _	BODY TYPE)	Y L N UNK L		
47 BODY 48 SPECIAI TYPE USAGE		(47)BODY (48)SPECIAL TYPE USAGE	(49) VEHICLE OWNERSHIP		
TYPE USAGE 50 INITIAL IMPACT (51 VEHICL		50 INITIAL IMPACT (51 VEHICLE	(52) TRAVEL		
POINT STATUS		POINT STATUS	SPEED		
53.)VEHICLE 54. DRIVER	(65) DRIVER	(53) VEHICLE (54) DRIVER	(55) DRIVER		
GRADIENT PRESEN		GRADIENT PRESENCE	CONDITION 57 STATE		
56. DRIVER NUMBER	57. STATE	56. DRIVER NUMBER	SI. SIMIE		
NUMBER 58. DRIVER		58. DRIVER			
NAMÉ		NAME			
59. DRIVER		59. DRIVER ADDRESS			
ADDRESS 60, CITY, STATE		60. CITY, STATE			
& ZIPCODE 61 SEX 62 DATE OF 63 PHONE		& ZIPCODE 61. SEX 62. DATE OF 63. PHONE			
61. SEX 62. DATE OF 63. PHONE BIRTH		BIRTH B3. FRONE			
64. COMM. VEH. 65. DRIVER		64. COMM. VEH. 65. DRIVER			
Y L N L CLASS 67. CARRIER		Y □ N □ CLASS			
68. CARRIER		68. CARRIER			
ADDRESS		ADDRESS			
69. CITY, STATE		69. CITY, STATE			
& ZIPCODE 70. USDOT # ICC #	PUC#	& ZIPCODE  70. USDOT # ICC #	PUC #		
70. GGEOT#   ICC #	, oc #		1.00.		
72.)VEH. (73.)CARGO	74. GVWR	72.VEH. (73)CARGO	74. GVWR		
CONFIG. BODY TYPE		CONFIG. BODY TYPE	77. RELEASE OF HAZMAT		
75. NO. OF (76) HAZ ARDOU AXLES MATERIALS		75. NO. OF (76) HAZ ARDOUS MATERIALS	77. RELEASE OF HAZMA? Y ☐ N ☐ UNK☐		
AA-45 (11/95)		PAGE:	PennDOT - BHSTE		
(1,,,,,,	1540000	FAGE			

78. RESPONDING EMS AGENCY	INCIDENT #:	INCIDENT #: ACCIDENT DATE:				
79. MEDICAL FACILITY	ACCIDENT DA					
80 PEOPLE INFORMATION  A B C D E F G NAME	ADDRESS		н ј	J	K L	м
						+-
						+
<u> </u>						
			Ĺ			
86. DIAGRAM			İ			o
(81) ILLUMINATION 82 WEATHER			1			Ü
(83) ROAD SURFACE						-
84. PENNSYLVANIA SCHOOL DISTRICT						
(IF APPLICABLE)						
·						
85. DESCRIPTION OF DAMAGED PROPERTY						: 
			:			
OWNER						
ADDRESS						
PHONE					ADDET	
87. NARRATIVE - IDENTIFY PRECIPITATING EVENTS, CAUSATION FACTOR DETAILS, LIKE INSURANCE INFORMATION AND LOCATION OF TOWE	S, SEQUENCE OF EVENTS D VEHICLES, IF KNOWN.	S, WITNESS STATEMEN	IS, AND F	ROVIDE	ADDITE	JIAL
Mary Association (Control of the Control of the Con		<u> </u>				
					,	
INSURANCE COMPANY		MPANY				
UNIT POLICY		PLICY				
1 NO	DDRESS	NO		PHONE	-	
88.				PHONE	:	
WITNESSES NAME AL	DDRESS			FINOINE		
89. VIOLATIONS INDICATED	90. SECTION NU	IMBERS (ONLY IF CHARC	SED)		1	C NTC
UNIT 1					-	Πil
						$\exists \exists$
UNIT 2	(91.)PROBABLE (92.)	TYPE (93.)RESULTS		- n - l n -	AR COT	LI LI
91.) PROBABLE (92.) TYPE (93.) RESULTS NO TEST EST	USE	TEST SJ. REGGETS	□ NO TE REFL	:51   94. JSE	INVESTIC COMPLI	ETE ?
UNIT 1 0% UNIK UNIT	2	0%	ا ت	INK YE	s *	<b>1</b> 0 ∏
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2519928						



## COMMONWEALTH OF PENNSYLVANIA POLICE ACCIDENT SUPPLEMENTAL

(XX) REFER TO OVERLAY SHEETS REPORTABLE NON-REPORTABLE **ACCIDENT TIME & LOCATION** POLICE INFORMATION 10. DAY OF WEEK 9. ACCIDENT 1. INCIDENT DATE NUMBER 12. NUMBER 11. TIME OF 2. AGENCY OF UNITS 15. PRIV. PROP. ACCIDENT NAME DAY 13. # KILLED 14. # INJURED 3. STATION 4. PATROL  $\underline{\mathsf{N}}$ ZONE BADGE PRECINCT CODE 20. COUNTY 5. INVESTIGATOR NUMBER CODE 6. APPROVED BY 21. MUNICIPALITY BADGE NUMBER - COMPLETE ONLY THE INFORMATION THAT HAS CHANGED SINCE ORIGINAL REPORT UNIT#: 58. DRIVER 36. LEGALLY Y N 37. REG. PARKED PLATE 38. STATE 59 DRIVER 39. PA TITLE OR OUT-OF-STATE VIN 60. CITY, STATE & ZIPCODE 40. OWNER 63. PHONE 62. DATÉ OF BIRTH 61. SEX 41. OWNER ADDRESS 42. CITY, STATE 64. COMM VEH Y N N 65. DRIVER 66. DRIVER & ZIPCODE 43, YEAR CLASS S. S. # 44. MAKE 45. MODEL (NOT BODY TYPE) 47. BODY 46. INSURANCE Y N N UNK U 49.)VËHICLE 68. CARRIER ADDRESS 69. CITY, STATE & ZIPCODE 48 SPECIAL USAGE 51 VEHICLE STATUS 54 DRIVER PRESENCE OWNERSHIP
52.)TRAVEL
SPEED
55.)DRIVER 50 INITIAL IMPACT POINT 53 VEHICLE GRADIENT ICC# PUC# POINI STATUS SPEED

(53.)KEHICLE (54.)DRIVER (55.)DRIVER (72.)VEHICLE (73.)CARGO (74. GVWR (74. 77. RELEASE OF HAZ MAT DETAILS COMPANY INSURANCE 94. INVESTIGATION COMPLETE? INFORMATION UNIT YES NO 🗌

NO AA-45-S (1/92) NO

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CINTER FOR HIGHWAY SAFETY

PENNDOT USE ONLY